PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with

plicable fee(s), to: Mail Mail Stop ISSUE FE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

or Fax (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)					Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying			
010					papers. Each additional paper, such as an assignment or formal drawing, must			
25944 7590 03/06/2006					have its own certificate of mailing or transmission.			
OLIFF & BERRIDGE, PLC					Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United			
P.O. BOX 19928					States Postal Service with sufficient postage for first class mail in an envelope			
P.O. BOX 19928 ALEXANDRIA, VA 22320					I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.			
Will Company of				EFICE		(Depositor's name)		
MANAGO						···	(Signature)	
							(Date)	
APPLICATION NO.	FILING DATE	FIRST NAMED INVE			ror	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
10/510,206 11/15/2004 TITLE OF INVENTION: METHOD OF ASSEMBLING AND CHEC			Yann Belleguic		121131	8637		
EOKE.								
METHOD OF ASSEMBLING AND MONITORING AN ACOUSTIC P								
APPLN. TYPE	SMALL ENTITY	ISSUE FI	EEE DI		BLICATION FEE	TOTAL FEE(S) DUE	300.00 OP DATE DUE	
nonprovisional	NO	\$1400		\$300		\$1700	06/06/2006	
						\$1760 I	00/00/2000	
EXAMINER		ART UNIT		CL.	CLASS-SUBCLASS			
KOCH, G	1734			156-064000				
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). 2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys							& BERRIDGE, PLC	
☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.				or agents OR, alternatively,				
The Address in the F10/SB/122 attached. (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is 3								
PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 2 registered patent listed, no name wil					attorneys or agents. If be printed.	no name is 3		
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)								
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.								
recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)								
HUREL HISPA		Gonfreville L'Orcher, FRANCE						
Please check the appropriate assignee category or categories (will not be printed on the patent):								
		ries (will not be pri	ined on the p	atem).	Individual - was Co	orporation of other private gr	oup entity Government	
4a. The following fee(s) are		4b. Payment of Fee(s): A check in the amount of the fee(s) is enclosed. (ck179048, \$1700)						
Publication Fee (No small entity discount permitted)			Payment by credit card. Form PTO-2038 is attached.					
Advance Order - # of Copies			The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 15-0461 (enclose an extra copy of this form).					
5. Change in Entity Status	(from status indicated above		Deposit A	Account I	umber 13-0401	(enclose an extr	ra copy of this form).	
5. Change in Entity Status (from status indicated above) a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).								
The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. NOTE: The Issue Fee and Publication Fee Arequired) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the Upyled States Parent and Trademark Office.								
interest as shown by the reco	ords of the Upyled States Par	ent and Frademark	Office.	ouici ui	ar tile applicant, a regi	stered attorney or agent, or u	ne assignee of other party in	
Authorized Signature	1 Mjul	SONTE	2/		Date Ap	ril 21, 2006		
Typed or printed name	William P. Bei	ridge//			Registration N	o. <u>30.024</u>		
This collection of information	on is required by 37 CFR 1.3	11. The information	is required t	to obtain	or retain a benefit by the	ne public which is to file (and	d by the USPTO to process)	
This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22315-1450.								
this form and/or suggestions Box 1450, Alexandria, Virgi Alexandria, Virginia 22313-	for reducing this burden, shin 22313-1450. DO NOT 1450.	nould be sent to the SEND FEES OR C	Chief Inform OMPLETED	nation Of FORMS	ficer, U.S. Patent and TO THIS ADDRESS	Trademark Office, U.S. Dep SEND TO: Commissioner	artment of Commerce, P.O. for Patents, P.O. Box 1450,	
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.								